Case 24-13609 Doc 85 Filed 01/21/25 Page 1 of 5

Fill in th	nis information to identify the case:			
Debtor N	lame			
11.75.10	tates Bankruptcy Court for the: District of			
United S	Check if	thic ic	an.	
Case number:				al I
Offic	ial Form 425C			
Mon	thly Operating Report for Small Business Under Chapter 11		1	2/17
Month:				
l ine of	business: NAISC code:	MM / DD / YY	ΥΥ	
	ordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury have examined the following small business monthly operating report and the accompanying			
	ments and, to the best of my knowledge, these documents are true, correct, and complete.			
Respon	sible party:			
Original	signature of responsible party			
	name of responsible party			
	1. Questionnaire			
Δ				
Ans	swer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.	Yes	No	N/A
	If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.		110	14/74
1.	Did the business operate during the entire reporting period?	_ 🗆		
2.	Do you plan to continue to operate the business next month?			
3.	Have you paid all of your bills on time?			
4.	Did you pay your employees on time?			
5.	Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?			
6.	Have you timely filed your tax returns and paid all of your taxes?			
7.	Have you timely filed all other required government filings?			
8.	Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?			
9.	Have you timely paid all of your insurance premiums?			
	If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit			
10.	Do you have any bank accounts open other than the DIP accounts?			_
11.	Have you sold any assets other than inventory?			
12.	Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?			
13.	Did any insurance company cancel your policy?			
14.	Did you have any unusual or significant unanticipated expenses?			
15.	Have you borrowed money from anyone or has anyone made any payments on your behalf?			
16	Has anyone made an investment in your business?			

## Case 24-13609 Doc 85 Filed 01/21/25 Page 2 of 5

e previous s case.	\$_		_
	+ \$_		_
eport.	<b>=</b> \$_		_
checks that			
kruptcy but ney, the			
	\$		
		ney, the	

	Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it <i>Exhibit F</i> . Identify who owes you money, how much is owed, and when payment is due. Report the total from <i>Exhibit F</i> here.	
5.	Total receivables	\$
	(Exhibit F)	
	5. Employees	
6.	What was the number of employees when the case was filed?	
7.	What is the number of employees as of the date of this monthly report?	
	O. Burfaraianal Fara	
0	6. Professional Fees  How much have you paid this month in professional fees related to this healtruntay ease?	<u> </u>
	How much have you paid this month in professional fees related to this bankruptcy case?  How much have you paid in professional fees related to this bankruptcy case since the case was filed?	\$
	How much have you paid this month in other professional fees?	\$
1.	How much have you paid in total other professional fees since filing the case?	\$

	Column A Projected	_	Column B Actual	=	Column C  Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$	-	\$	=	\$
33. Cash disbursements	\$	-	\$	=	\$
34. Net cash flow	\$	-	\$	=	\$

35.	Total	projected	cash	receipts	for the	next month:

36. Total projected cash disbursements for the next month:

37. Total projected net cash flow for the next month:

\$\_\_\_\_\_

**-** \$

**=**\$\_\_\_\_\_

## Case 24-13609 Doc 85 Filed 01/21/25 Page 4 of 5

Debtor Name	Case number
8. Additional Information	
If available, check the box to the left and attach copies of the following docur	ments.
38. Bank statements for each open account (redact all but the last 4 digits of	of account numbers).
☐ 39. Bank reconciliation reports for each account.	
40. Financial reports such as an income statement (profit & loss) and/or bal	lance sheet.

■ 41. Budget, projection, or forecast reports.

42. Project, job costing, or work-in-progress reports.

## **RECEIPTS AND DISBURSEMENTS RECAP**

Debtor:				Case Number:			
Date Case was filed:				ī			
	This form is to be date. It serves a	be used to record as a running tota	d Monthly Opera I of overall recei	iting Re	eports' Receipts bursements and	and Disbursemed net cash flow for	ents filed to or the case.
	Year:			_	Year:		
	Receipts	Disb	Net		Receipts	Disb	Net
Jan							
Feb							
Mar							
Apr							
May							
Jun							
Jul							
Aug							
Sep							
Oct							
Nov							
Dec							